

UNITED STATES SECURITIES AND EXCHANGE COMMISSION -Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number:

Estimated avera

Expires:

3235-0076 May 31, 2005



Name of Offering (check if this is an amendment and name has changed, Privaris, Inc Offering of Common Stock	and indicate change.)
	rle 506 Section 4(6) ULOE 1209388
A. BASIC IDENTIFIC	TATION DATA
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, an Privaris, Inc.	d indicate change.)
Address of Executive Offices (Number and Street, City, State, Zip Code) 675 Peter Jefferson Parkway, Suite 150	Telephone Number (Including Area Code) (434) 293-4033
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Charlottesville, VA 22911	
Brief Description of Business	35
. A technology company in the biometrics space.	PROCESSED
Type of Business Organization	other (please specify): APR 1 3 2007
Actual or Estimated Date of Incorporation or Organization: Month 0 3 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service	Year O 1 Actual Estimated FINANCIAL abbreviation for State:
CN for Canada; FN for other fore	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

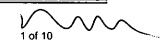
Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A BASICIDENTIFICATION DATA



- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issue has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

· Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in Parker, Ransom J.	ndividual)				
Business or Residence Address 675 Peter Jefferson Parky	•	nd Street, City, State, Zip C Charlottesville, VA 2	•		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if in McCarthy, Edward C.	ndividual)				
Business or Residence Address 675 Peter Jefferson Parky		nd Street, City, State, Zip C Charlottesville, VA 2			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in Kohonoski, Mike	ndividual)				
Business or Residence Address 675 Peter Jefferson Parky	•	nd Street, City, State, Zip C Charlottesville, VA 2	· ·		1 - 200 20 - J
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Reigle, Tom	ndiviđual)			,	1 (7.4) 1 (8.33)
Business or Residence Address 675 Peter Jefferson Parky		nd Street, City, State, Zip C Charlottesville, VA 2			T. go.
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Johnson, Barry W.	ndividual)				
Business or Residence Address 675 Peter Jefferson Parky	,	nd Street, City, State, Zip C Charlottesville, VA 2			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if it Nussrallah, Steven G.	ndividual)				
Business or Residence Address 675 Peter Jefferson Parky	•	nd Street, City, State, Zip C Charlottesville, VA 2			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if it Knighton, Ernest	ndiviđual)				
Business or Residence Address 210 Blair Court, Edenton	•	nd Street, City, State, Zip C	ode)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

2. Enter the information requested for the following:

- · Each promoter of the issuer, if the issue has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if it Hunter, Wayne L.	ndividual)				
Business or Residence Address 675 Peter Jefferson Parky		nd Street, City, State, Zip C Charlottesville, VA 2			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if i Petze, John D.	ndiviđual)				
Business or Residence Address 675 Peter Jefferson Parky	`	nd Street, City, State, Zip C Charlottesville, VA 2	•		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
Business or Residence Address	(Number a	nd Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				. 100
Business or Residence Address	(Number a	nd Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number a	nd Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
Business or Residence Address	(Number a	nd Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number a	nd Street, City, State, Zip Co	ode)		
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			. H	В	. INFORM	MATION A	ABOUT OF	FERING		1.44			*.4.
1 Has	the issuer sol	d or does t	he iccuer in	tend to sell	to non-acc	radited inv	estore in thi	r offering?				Yes	No
1. 1145	the issuer son	u, or does t	ne issuei ni				ımn 2, if fil	-		•••••		<u>Z</u>	ш
2 11/1								-				#3.1/4	
2. Wha	at is the minin	num investr	nent that w	ill be accep	ted from an	y individua	117		*************			\$N/A Yes	No
3. Does	s the offering	permit join	t ownership	of a single	unit?		•••••					🖾	
simi asso deale	er the information the information of the informati	tion for soli i or agent o han five (5)	citation of f a broker of persons to	purchasers or dealer re	in connecti gistered wi	on with sal th the SEC	es of securi and/or wit	ities in the h a state or	offering. If states, list	a person to the name of	o be listed in the broke	s an er or	
	ne (Last name	e first, if ind	lividual)										
N/A													
Business	s or Residence	e Address (l	Number and	l Street, Cit	y, State, Zij	p Code)							
Name of	Associated E	Broker or De	ealer										
States in	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pr	ırchasers							
	'All States" o												All
•				•								Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]		[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA']	[WA]	[WV]	[WI]	[WY]	[PR]	
	ne (Last name	e first, if ind	lividual)				i ka ina afisi Tanan						
N/A							• • • •						
Business	or Residence	e Address (I		Street, Cit	y, State, Zij	p Code)					•		
Name of	Associated E	Broker or De	ealer										
States in	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	irchasers			· · · · · · ·				
	'All States" or									************	*************		Ali
				·								States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
	ne (Last name	e first, if ind	ividual)										
N/A	<u>:</u>												
Business	s or Residence	e Address (1	Number and	Street, Cit	y, State, Zip	Code)					;		
Name of	Associated E	Broker or De	ealer										
States in	Which Perso	n Listed Ho	s Solicited	or Intende t	o Solicit Po	irchacere					· · · · · ·		
	'All States" or							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•••••••	······	States	All
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	{ DE }	[DC]	[FL]	[GA]	{ HI }	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
(MT)	[NE]	[NV]	[NH]	[[[[[[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
(RI)	[SC]	[SD]	[אד]	[TX]	ָנ דען <u>(</u>	[VT]	[VA]	[WA]	[wv]	[wı j	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

, h	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pri-		Amount Already Sold
	Debt	\$		\$
	Equity	\$7,526,342.00		\$7,526,342.00
	☐ Common ☐ Preferred			•
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests			\$
	Other (Specify)			\$
	Total			\$7,526,342.00
	Answer also in Appendix, Column 3, if filing under ULOE.	. , . ,		,,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Inves	tors	Aggregate Dollar Amount of Purchases
	Accredited Investors	117		\$7,344,842.00
	Non-accredited Investors			\$_181,500.00
	Total (for filings under Rule 504 only)			\$·
	Answer also in Appendix, Column 4, if filing under ULOE.		_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of Offering	Type of Secur	ity	Dollar Amount Sold
	Rule 505	N/A	•	\$N/A
	Regulation A			\$
	Rule 504		_	\$ \$
		•		Ф.
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		- ; -	<u> </u>
	Transfer Agent's Fees			\$0.00
	Printing and Engraving Costs	1		\$750.00
	Legal Fees			\$20,000.00
	Accounting Fees			\$4,250.00
	Engineering Fees			\$0.00
	Sales Commissions (specify finders' fees separately)			\$0.00
	Other Expenses (identify)			\$0.00
	Total		_	£25,000,00

5.4	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	e of	PROCEEDS	A+ *-	
	b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 a total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gr proceeds to the issuer."	ross		•	\$5,975,000.00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for er of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to issuer set forth in response to Part C – Question 4.b above.	box			
			Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees		\$ 0.00		\$
	Purchase of real estate		\$0.00		\$
	Purchase, rental or leasing and installation of machinery and equipment		\$0.00		\$
	Construction or leasing of plant buildings and facilities		\$0.00		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$0.00		s
	Repayment of indebtedness		\$175,000.00		S
	Working capital		\$0.00		\$
	Other (specify): Product Development, Marketing/Customer Capture, G & A		\$		\$7,144,842.00
			\$. \square	\$
	Column Totals	\Box	\$175,000.00		\$7,144,842.00
	Total Payments Listed (column totals added)			\$7,319	,842.00
(e)	D. FEDERAL SIGNATURE	17.		*	
on	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is stitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon write issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.				
SSU	er (Print or Type) Signature		D	ate /	· 1
Pri	varis, Inc.			3 <u> 3</u>	70/0
Var	ne of Signer (Print or Type) Tille of Signer (Print or Type)			,	<i>\undersignar</i>
lol	nn Petze President				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

<u>. </u>	大大、自己有效的。 E: STATE SIGNATURE 只要的一个人,也是不是一个生态。
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions Yes No of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to the offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly thorized person.
Iss	uer (Print or Type) Signatur Date
Pr	ivaris, Inc.
Na	me of Signer (Print or Type) Title of Signer (Print or Type)
Jo	hn Petze President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		an and	199 2.5		APPRENDIX				
1		2	3			4		5 Disquali	
			Type of security				•	Under Sta	ite ULOE
		l to sell	and aggregate		_			(if yes,	
		ccredited s in State	offering price offered in state			f investor and urchased in State		explana waiver g	
		-Item 1)	(Part C-Item 1)			t C-Item 2)		(Part E-	
	(1 1		(-2.1-0-112111-1)	Number of	(Number of		\(\frac{1}{2} = \frac{1}{2} =	,
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA	- -	X	Common Stock \$7,500,000	1	\$17,200				X
СО		X	Common Stock \$7,500,000	1	; \$ 35,000				
СТ				,					
DE								1	
DC		X	Common Stock \$7,500,000	1 '	\$10,000			iÝ I	, , X
FL		Х	Common Stock \$7,500,000	2	\$20,000				Х
GA		Х	Common Stock \$7,500,000	4	\$51,300			<u> </u>	х
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IA									
KS					-				
KY									
LA									
ME									
MD	_						· 		
МА		Х	Common Stock \$7,500,000	1	\$10,000				Х
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MN									
MS									

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	Intend	to sell	Type of security and aggregate					under Sta (if yes,	
		ccredited	offering price		Type o	f investor and		explana	
		s in State	offered in state			irchased in State		waiver g	
	(Part B	-Item 1)	(Part C-Item 1)		(Par	t C-Item 2)		(Part E-	Item 1)
				Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ		х	Common Stock \$7,500,000	1	\$313				х
NM								**	
NY		X	Common Stock \$7,500,000	2	\$16,600				х
NC		х	Common Stock \$7,500,000	51	\$4,671,357	12	\$51,500	डें च्हा ह !	X
ND	1					,		,	
ОН		х					<u>.</u>		
OK									
OR									
PA		X	Common Stock \$7,500,000	1	\$2,200				х
RI									
SC		X	Common Stock \$7,500,000	9	\$1,111,000	1	\$60,000		х
SD									
TN									
TX									
UT			· · · · · · · · · · · · · · · · · · ·	`					
VT									
VA		X	Common Stock \$7,500,000	43	1,399,892	2	\$70,000		Х
WA									
wv			<u> </u>			,			
WI									

5	APPENDIX													
1		2	3		4									
			Type of security											
		to sell	and aggregate					(if yes, attach						
		ccredited	offering price		Type of investor and									
ľ	investor	s in State	offered in state	amount purchased in State					waiver granted)					
	(Part B	-Item 1)	(Part C-Item 1)		(Part E	Item 1)								
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY														
PR														

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